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POTENTIAL HAZARDOUS WASTE SITE FINAL STRATEGY DETERMINATION

REGION	SITE	NUMBER
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File this form in the regional Hazardous W System; Hazardous Waste Enforcement Ta					US EP/	A RECORDS	CENTER REGI
A. SITE NAME Milana & Relim	I. SITE IDENTIFICA	TREET				483	376
c. CITY Colona	0. s	TATE	hegia	n	E. Z	IP CODE	
	II. FINAL DETERMIN					- 1	
Indicate the recommended action(s) and ag	gency(les) that should be involv	ed by ma	rking 'X' i	n the app			
RECOMMEN	DATION		MARK'X'	EPA	STATE	LOCAL	PRIVATE
A. NO ACTION NEEDED							
B. REMEDIAL ACTION NEEDED, BUT NO RE	ESOURCES AVAILABLE						
C. REMEDIAL ACTION (If yes, complete Secti	lon IV•)		X				X
D. ENFORCEMENT ACTION (If yes, specify in managed by the EPA or the State and what t	n Part E whether the case will be plype of enforcement action is antic	primarily ipated.)					V N
F. IF A CASE DEVELOPMENT PLAN HAS BE THE DATE PREPARED (mo., day, & yr.) H. PREPARER INFORMATION 1. NAME	D 2. T	ATE FILE	ED (mos, day,	& y1.)		ATE(mo., d	lay, & yr.)
Jacy Kilmor						7-0	
List all remedial actions, such as excavat for a list of Key Words for each of the acti remedy.		as soon a	s resource	s become	available.		
A. REMEDIAL ACTION	B. ESTIMATED CO	оѕт		С	REMARKS		
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D. TOTAL ESTIMATED COST

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Α.	SHORT TERM/EMERGENCY ACTIONS (On Site and Olf-Site): List all emergency actions taken or planned to bring the site under-
	immediate control, e.g., restrict access, provide alternate water supply, etc. See instructions for a list of Key Words for each of
	the actions to be used in the spaces below.

1. ACTION	2. ACTION START DATE (mo,day,&yr)	3. ACTION END DATE (mo,day,&yr)		5. COST	6. SPECIFY 311 OR OTHER ACTION. INDICATE THE MAGNITUDE OF THE WORK REQUIRED.
			A	s	
				\$	
	0.0	Sales Sales		\$	
				\$	
				\$	
				s	

B. LONG TERM STRATEGY (On Site and Off-Site): List all long term solutions, e.g., excavation, removal, ground water monitoring wells, etc. See instructions for a list of Key Words for each of the actions to be used in the spaces below.

1. ACTION	2. ACTION START DATE (mo,day,&yr)	3. ACTION END DATE (mo,day,&yr)	4. ACTION AGENCY (EPA, State Private Party)	5. COST	6. SPECIFY 311 OR OTHER ACTION: INDICATE THE MAGNITUDE OF THE WORK REQUIRED.
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C. MANHOURS AND COST BY ACTION AGENCY

1.ACTION AGENCY	2. TOTAL MAN- HOURS FOR REMEDIAL ACTIVITIES	3. TOTAL COST FOR REMEDIAL ACTIVITIES
8. EPA		\$
b. STATE		\$
C. PRIVATE PARTIES		3
d. OTHER (specify):		\$

EPA Form T2070-5 (10-79) REVERSE